

City of Santa Barbara Parks and Recreation Department P.O. Box 1990

Santa Barbara, CA 93102 Phone: (805) 963-7567 or 963-7605 Fax: (805) 963-7569 or 963-7607



PICNIC SITE OR INDOOR BUILDING APPLICATION

□ Park:			🛚 MacKenz	☐ MacKenzie Adult Bldg. ☐ Ortega Welcome House						
Date(s):			Day(s):	М	Tu	W	Th	F	Sa Su	J
Hours: Set-up:	to _	Event:	to		Breako	lown:		to _		_
Note: Times listed about inspect & check site b		ered firm, so carefully considences.	er the span of time you i	need fro	m setup thi	rough bi	reakdowi	n. Park mo	nitors/range	∍rs
Estimated Attenda	ance:	Event Desci	ription:							
Applicant:			Organiza	ation: _						
Mailing Address:				City: _				_ Zip:		
Daytime Phone: _		Evening Phone: _		Fax:			Er	mail:		
Use Category (che	eck ☑ one): 🔲	Private/Commercial	☐ Non-Profit (#) 🖵 G	ovt. Ager	су
Alcoholic beverag	jes served (allo	owed only in certain parks)?	☐ Yes ☐ No	If Y	ES, desc	ribe: _				
Amplified sound of	or music used	(allowed only in certain parks	s)? 🗆 Yes 🗀 N	lo If`	YES, des	cribe:				
Requesting permi	ssion to bring	an inflatable bouncer (a	allowed only in certain pa	arks)?		☐ Ye	es	☐ No		
Electricity require	d (available only i	in certain parks)?	es ☐ No If YE	S, # c	of hours n	eeded	l?			
☐ Bringing your	own food?	☐ Catered?								
0 07		eque (available only in certai	in parks)	. \Box	l No					
		•	. ,					7 v	□ Na	
	•	k (available only for licensed							☐ No	
		MUST BE SIGNED, TH ARE NOT CONFIRME	•							
against any and a causes of action of account of loss or limited to the empl	II loss, damage of any characte damage to pro loyees, subcon	defend, indemnify and e, liability, claims, deman er which the City, its office perty or the loss of use to tractors, agents and invifancy City premises under the contractors.	ds, detriments, cost cers, employees an hereof and for bodily tees of each party h	s, char d ager r injury ereto)	ges, expe nts may in to or dea arising ou	ense (ii ncur, s th of a ut of or	ncluding ustain ny pers in any	g attorne or be sui sons (incl	y's fees) a bjected to luding but	and on not
Signature of Appl	icant:					Date:	•			
FOR OFFICE USE	ONLY									
Application Fee:	\$									
Reservation Fee:	\$	 (hrs @ \$	/hr)							
Cleaning Fee:	\$									
Monitor Fee:	\$	(hrs @ \$	/hr)							
Utility Fee:	\$	(hrs @ \$	/hr)							
Security Deposit:	\$	(refundable)								
Misc. Fees:	\$									
TOTAL FEES:	\$									